

# Mental Health update



Joint ASC & Health Scrutiny Commission 30<sup>th</sup> November 2023



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# Adult Mental Health: Strategy and partnership across Leicester

Joint
Integrated
Care Strategy
Adult Mental
Health
2021-25

Prevention

Accommodation

Employment Education and Volunteering Healthy Minds

- Leicester
City place
based plan for
Mental Health
2022 - 2027

Access Chs/YP Emotional/wellbeing

Access adults primary/ Neighbourhood MH

Isolation older/adults

No deaths by suicide in city

Both the Joint Integrated Care Adult MH Strategy and Health Minds place base plan are driven through Leicester City's Mental Health Partnership Board.

Following extensive consultations and engagements the Adult Mental Health strategy was approved in April 2021.

Leicestershire Step up to Great Mental Health consultation (LLR CCG and LPT) 2021.



## **Community Adult Mental Health provision:**

### **Community services**

- City Services, including, Mental Health Act Assessments, section 117, supporting discharge from hospitals etc
- P3 Health and Well-being recovery service
- LPT Employment Services
- City Employment Services
- General Psychiatry services
- Perinatal mental health services
- ADHD services
- Memory services
- Neighbourhood cafes and support

### **Action:**

- ✓ Joint working with community organisations to build resilience
- ✓ Better Mental Health for All programme
- ✓ Place based partnership
- ✓ Continued review of demand to manage waiting times
- ✓ Regional work within the East Midlands under ADASS (Association of Directors of Adult Social Care)



### **LPT Community Mental Health update:**

Adult General Psychiatry

Increasing referrals

Increased challenges (including discharge)

Increasing workforce challenges

Increase in difficult and complex caseloads

Perinatal

Meeting target and KPIs 10% target of all LLR women

1 face to face / virtual contact in 12 months

Increased investment since Pandemic

**ADHD** 

Increase in referrals

Unable to meet 18 week referral and treat KPI

Known national issue across all Trusts



### **Community Mental Health**

Memory services (identifying dementia) Increasing referrals since Pandemic

Assessment
Diagnosis
Treatment
18 week KPI

Pre Covid 85% Post Covid extra 200 patients a month

<u>Dynamic</u> <u>Psychotherapy</u> Increasing referrals last 4 months

#### **Action:**

- ✓ Recruiting to vacancies.
- ✓ Assessment capacity
- ✓ Job planning is now in place
- ✓ Assurance for accurate recording



### **LPT Community Mental Health update:**

<u>Dynamic</u> <u>Psychotherapy</u> <u>Service</u> Increasing referrals last 4 months

#### **Action:**

- ✓ Recruiting to vacancies.
- ✓ Assessment capacity
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# Psychological Therapies

Increasing referrals last 4 months

#### **Action:**

- ✓ Increased assessment slots
- ✓ Increased recruitment
- ✓ Increased clinical capacity

### **TSPPD**

(Therapeutic Service for People with Personality Disorder)

Increasing a significant improvement in waits

### **Action:**

- ✓ Implementing/monitoring job plans.
- ✓ Collaborate strategy
- ✓ Develop rolling decider groups
- ✓ Close working with locality teams to inform clinical presentation that is suitable for referral.



### **Urgent Care**

### **Mental Health Central Access Point**

- Collaboration with Turning Point (initial call handler)
- 5000 calls each month on average
- Reduces need for secondary Mental Health support
- KPIs from April 2024
- 64% of referrals lead to actual support

### **Urgent Care Hub**

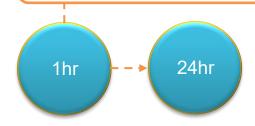
- All age service 24/7 averaging 270 referrals month
- Supported a reduction in urgent referrals and specifically ambulance conveyance to ED
- Refurbishment expected to finish in November 2023
- Increasing demand

#### **Crisis**

- Home treatment (avoiding inpatient care)
- Early discharge planning pilots being explored.
- Caseload between 180-210 anyone time
- KPI: 4 hour response for very urgent
- KPI: 24 hour response for urgent

#### **Mental Health Liaison Service**

- 16-65 yr inpatient wards across LLR
- In addition to outpatient clinicis and specialist Chronic Fatigue Syndrome service
- Multi disciplinary teams
- · KPIs being met.



Clock starts from point of assessment. Pilot being looked at with e-referral process to avoid batch referrals from A&E



### **LPT Acute Inpatient update:**

### Reduced out of area placements

- Increasing effective flow and step down
- Expansion of community teams
- Focus on preventing needless delays

### Clinically ready for discharge

- Implementing new discharge model (from LPT to other agencies)
- Current challenge lack of accommodation and social workers to support discharge

### Improved pathways

- Pilot of a Psychological Informed Partnership Approach (PIPA) model
- Focus on high quality, therapeutic and least restrictive practice
- Eradicating dormitories in our inpatient unit

### Length of stay

- · Review of current model
- MDT approach to support purposeful inpatient admissions





## **Summary**

### **Connecting care**

- Joint working between the City Council and LPT to support our people with timely services
- Services are connected with local community groups, through our neighbourhood working, community cafes and our joint working
- There is an increasing demand and our Better Mental Health for All transformation programme supports us to evolve and meet this new demand

We can all make a difference

✓ Championing good mental health, well-being and employment through our City Council, LPT, wider public services and our voluntary and community services to support people in our city.

